

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

CITY OF SAN ANTONIO
CITY CLERK

FORM C/OH
COVER SHEET PG 1

2004 JAN 15 PM 3:35

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)

2 Total pages filed:

26

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

Mr.
NICKNAME

Carroll
LAST

W.
SUFFIX

Schubert

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

☐ Change of Address

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

600 Navarro Suite 500
San Antonio, TX 78205

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(210) 349-0515

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

Mrs.
NICKNAME

Allison
LAST
Greer

L.
SUFFIX

7 CAMPAIGN
TREASURER
ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

1723 Typhoon

San Antonio, TX 78248

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(210) 493-3430

9 REPORT TYPE



January 15



30th day before election



Runoff



15th day after campaign treasurer appointment (officeholder only)



July 15



8th day before election



Exceeded \$500 limit



Final report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

THROUGH

Month

Day

Year

07 / 01 / 03

12 / 31 / 03

11 ELECTION

ELECTION DATE

Month

Day

Year

ELECTION TYPE



Primary



Runoff



General



Special

12 OFFICE

OFFICE HELD (if any)

City Council District 9

13 OFFICE SOUGHT (if known)

14 NOTICE
OF DIRECT
CAMPAIGN
EXPENDITURE
BY OTHER
INDIVIDUALS

** Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. **

Name

Address / PO Box; Apt. / Suite #; City; State; Zip Code

☐ additional pages

GO TO PAGE 2



CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

RECEIVED FORM C/OH
CITY OF SAN ANTONIO
CITY CLERK
COVER SHEET PG 2

15 C/OH NAME Mr. Carroll W. Schubert

2004 JAN 15 PM 3:35
16 ACCOUNT # (Ethics Commission filers)

17 NOTICE
FROM
POLITICAL
COMMITTEE(S)

** This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. **

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

18 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ -0-

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 37,684.94

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ -0-

4. TOTAL POLITICAL EXPENDITURES

\$ 39,928.07

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

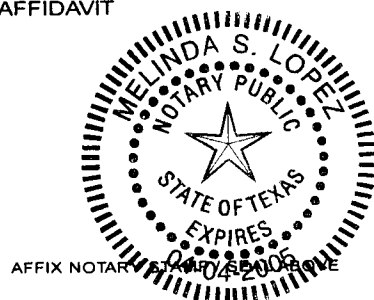
\$ 59,109.32

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ -0-

19 AFFIDAVIT



AFFIX NOTARY SEAL HERE

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Carroll W. Schubert
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Carroll W. Schubert, this the 15th day of January, 20 04, to certify which, witness my hand and seal of office.

Melinda S. Lopez
Signature of officer administering oath

Melinda S. Lopez
Printed name of officer administering oath

Notary
Title of officer administering oath

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A1**

2004 JAN 15 PM 3:35

The instruction guide explains how to complete this form.

Total pages Schedule A1:

Page 1 of 13

FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date

8/20/2003

Full name of contributor ☐ out-of-state PAC (ID#:

Ed & Deborah Barron

Contributor address; City; State; Zip Code

P.O. Box 877 Helotes, TX 78023

Amount of
contribution (\$)

\$1,000.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

8/20/2003

Full name of contributor ☐ out-of-state PAC (ID#:

Harris & Carolyn Connell

Contributor address; City; State; Zip Code

3311 Falling Brook San Antonio, TX 78258

Amount of
contribution (\$)

\$1,000.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

8/20/2003

Full name of contributor ☐ out-of-state PAC (ID#:

Deborah Bauer

Contributor address; City; State; Zip Code

2 Champions Mark San Antonio, TX 78258

Amount of
contribution (\$)

\$1,000.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

8/18/2003

Full name of contributor ☐ out-of-state PAC (ID#:

Bury+Partners SA Ventures

Contributor address; City; State; Zip Code

10000 San Pedro Suite 100 San Antonio, TX 78216

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

8/20/2003

Full name of contributor ☐ out-of-state PAC (ID#:

Murray Van Eman

Contributor address; City; State; Zip Code

3103 Stoney Leaf San Antonio, TX 78247

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.**

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**2004 JAN 15 PM 3:35 **SCHEDULE A1**

The instruction guide explains how to complete this form.

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FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date

8/20/2003

Full name of contributor

Jimmy Parks

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

101 Stumberg San Antonio, TX 78204

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

8/13/2003

Full name of contributor

GSABA PAC

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

10430 Gardendale Suite 200 San Antonio, TX 78230

Amount of
contribution (\$)

\$1,000.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

8/20/2003

Full name of contributor

David Fritsche

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

921 Proton Road San Antonio, TX 78258

Amount of
contribution (\$)

\$1,000.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

8/20/2003

Full name of contributor

John Friesenhahn

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

9822 Ball Street San Antonio, TX 78217

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

8/19/2003

Full name of contributor

Chesley Swann, III

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

P.O. Box 6862 San Antonio, TX 78209

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

2004 JAN 15 PM 3:35 SCHEDULE A1

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FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date

8/20/2003

Full name of contributor

John Schaefer

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

8620 N. New Braunfels #400 San Antonio, TX 78209

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

8/20/2003

Full name of contributor

Loeffler, Jonas & Tuggey

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

755 E. Mulberry #200 San Antonio, TX 78212

Amount of
contribution (\$)

\$1,000.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

8/13/2003

Full name of contributor

Hill Granados Retail Partners

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

7122 San Pedro #114 San Antonio, TX 78216

Amount of
contribution (\$)

\$1,000.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

8/20/2003

Full name of contributor

Steven Waters

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

311 E. Mandalay San Antonio, TX 78212

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

8/20/2003

Full name of contributor

Dean Davenport

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

11844 Bandera Road #711 Helotes, TX 78023

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1

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FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date
5/9/2003

Full name of contributor ☐ out-of-state PAC (ID#:

Richard Vensas

Contributor address; City; State; Zip Code

15365 Mutiny Court Corpus Christi, TX 78418

Amount of
contribution (\$)
\$100.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date
7/1/2003

Full name of contributor ☐ out-of-state PAC (ID#:

Karen Pistorio

Contributor address; City; State; Zip Code

506 Texas Point San Antonio, TX 78258

Amount of
contribution (\$)
\$200.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date
8/20/2003

Full name of contributor ☐ out-of-state PAC (ID#:

Steve Hanan

Contributor address; City; State; Zip Code

206 Happy Trail San Antonio, TX 78231

Amount of
contribution (\$)
\$250.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date
8/20/2003

Full name of contributor ☐ out-of-state PAC (ID#:

Bob Crittenden

Contributor address; City; State; Zip Code

614 Birdsong South San Antonio, TX 78258

Amount of
contribution (\$)
\$250.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date
8/20/2003

Full name of contributor ☐ out-of-state PAC (ID#:

Dan Wigodsky

Contributor address; City; State; Zip Code

215 Ridgemont Ave. San Antonio, TX 78209

Amount of
contribution (\$)
\$250.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1

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FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date

8/12/2003

Full name of contributor

Randy Dym

☐ out-of-state PAC (ID#: _____)

Contributor address; City; State; Zip Code

17117 Redland Road San Antonio, TX 78258

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

8/20/2003

Full name of contributor

Gordon Hartman

☐ out-of-state PAC (ID#: _____)

Contributor address; City; State; Zip Code

1175 W. Bitters Road San Antonio, TX 78216

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/1/2003

Full name of contributor

James O'Brien

☐ out-of-state PAC (ID#: _____)

Contributor address; City; State; Zip Code

103 Lismore San Antonio, TX 78258

Amount of
contribution (\$)

\$1,000.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

8/21/2003

Full name of contributor

Parsons Brinckerhoff PAC

☒ out-of-state PAC (ID#: _____)

Contributor address; City; State; Zip Code

One Penn Plaza New York, NY 10119

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

8/14/2003

Full name of contributor

Lewis Westerman

☐ out-of-state PAC (ID# C00287003)

Contributor address; City; State; Zip Code

3 Blenheim San Antonio, TX 78209

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date

8/10/2003

Full name of contributor

Cathy Obriotti Green

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

128 Grant Avenue San Antonio, TX 78209

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

8/21/2003

Full name of contributor

Kerry Benedict

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

2 Sugarwood San Antonio, TX 78248

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

8/19/2003

Full name of contributor

Rick Sheldon

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

601 Sonterra Blvd. San Antonio, TX 78258

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

8/19/2003

Full name of contributor

Sam Barshop

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

900 Isom Road #300 San Antonio, TX 78216

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

8/23/2003

Full name of contributor

Marmon Mok LLP

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

700 N. St. Mary's #1600 San Antonio, TX 78205

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
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FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date

8/26/2003

Full name of contributor

☐ out-of-state PAC (ID#:

DeZavala 31 Joint Venture

Contributor address; City; State; Zip Code

3707 N. St. Mary's #201 San Antonio, TX 78212

Amount of
contribution (\$)

\$200.00In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

8/19/2003

Full name of contributor

☐ out-of-state PAC (ID#:

Ron Ederer

Contributor address; City; State; Zip Code

7800 IH 10 West #135 San Antonio, TX 78230

Amount of
contribution (\$)

\$100.00In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

10/10/2003

Full name of contributor

☐ out-of-state PAC (ID#:

Bill Ellis

Contributor address; City; State; Zip Code

29235 Seabiscuit Fair Oaks Ranch, TX 78015

Amount of
contribution (\$)

\$1,000.00In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

10/10/2003

Full name of contributor

☐ out-of-state PAC (ID#:

Ed Kopplow

Contributor address; City; State; Zip Code

7744 Broadway San Antonio, TX 78209

Amount of
contribution (\$)

\$500.00In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

12/11/2003

Full name of contributor

☐ out-of-state PAC (ID#:

Jace Pearson

Contributor address; City; State; Zip Code

16414 San Pedro #365 San Antonio, TX 78232

Amount of
contribution (\$)

\$100.00In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.**

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A1**

2004 JAN 15 PM 3:36

The instruction guide explains how to complete this form.

Total pages Schedule A1:

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FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date

12/8/2003

Full name of contributor

☐ out-of-state PAC (ID#:

Goode Casseb Jones Riklin Choate & Watson PAC

Contributor address; City; State; Zip Code

P.O. Box 120480 San Antonio, TX 78212

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

12/10/2003

Full name of contributor

☐ out-of-state PAC (ID#:

Bill Greehey

Contributor address; City; State; Zip Code

P.O. Box 500 San Antonio, TX 78292

Amount of
contribution (\$)

\$1,000.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

12/12/2003

Full name of contributor

☐ out-of-state PAC (ID#:

Mark Watson, Jr.

Contributor address; City; State; Zip Code

P.O. Box 6886 San Antonio, TX 78209

Amount of
contribution (\$)

\$1,000.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

12/9/2003

Full name of contributor

☐ out-of-state PAC (ID#:

Michael Moore

Contributor address; City; State; Zip Code

9723 Mid Walk San Antonio, TX 78230

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

12/8/2003

Full name of contributor

☐ out-of-state PAC (ID#:

Thomas Sineni

Contributor address; City; State; Zip Code

208 Castle Gardens Dr. San Antonio, TX 78213

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.**

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

2004 JAN 15 PM 3:36 SCHEDULE A1

The instruction guide explains how to complete this form.

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FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date

12/10/2003

Full name of contributor

Mary Rose Brown

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

427 Stonewood San Antonio, TX 78216

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

12/5/2003

Full name of contributor

Ed Riojas, Jr.

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

11815 Tarragon Cove San Antonio, TX 78213

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

12/10/2003

Full name of contributor

Keith Boone

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

2 Imperial Oaks San Antonio, TX 78248

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

12/10/2003

Full name of contributor

Greg King

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

347 Charles Road San Antonio, TX 78209

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

12/10/2003

Full name of contributor

William Klesse

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

9 Tilbury Lane San Antonio, TX 78230

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
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FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date

12/10/2003

Full name of contributor

☐ out-of-state PAC (ID#:

Michael Ciskowski

Contributor address; City; State; Zip Code

11742 Elmscourt San Antonio, TX 78230

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

10/9/2003

Full name of contributor

☐ out-of-state PAC (ID#:

Dan Dement

Contributor address; City; State; Zip Code

18730 Stone Oak Pkwy #104 San Antonio, TX 78258

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

12/10/2003

Full name of contributor

☐ out-of-state PAC (ID#:

Valero PAC

Contributor address; City; State; Zip Code

P.O. Box 500 San Antonio, TX 78292

Amount of
contribution (\$)

\$10,000.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

12/12/2003

Full name of contributor

☐ out-of-state PAC (ID#:

Tim Geppert

Contributor address; City; State; Zip Code

13014 Country Walk San Antonio, TX 78216

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

12/17/2003

Full name of contributor

☐ out-of-state PAC (ID#:

Rick Sheldon

Contributor address; City; State; Zip Code

601 Sonterra Blvd. San Antonio, TX 78258

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A1**

The instruction guide explains how to complete this form.

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FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date 12/17/2003	Full name of contributor Mark Granados Contributor address; City; State; Zip Code 18111 Knob Hill San Antonio, TX 78258	<input type="checkbox"/> out-of-state PAC (ID#: Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 12/17/2003	Full name of contributor Christy Prescott Contributor address; City; State; Zip Code 1942 Far Niente San Antonio, TX 78258	<input type="checkbox"/> out-of-state PAC (ID#: Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 12/17/2003	Full name of contributor Jeff Webster Contributor address; City; State; Zip Code 18707 Cortland Estates San Antonio, TX 78258	<input type="checkbox"/> out-of-state PAC (ID#: Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 12/17/2003	Full name of contributor Kyle Watson Contributor address; City; State; Zip Code 1918 Far Niente San Antonio, TX 78258	<input type="checkbox"/> out-of-state PAC (ID#: Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	
Date 12/17/2003	Full name of contributor Ed Purvis Contributor address; City; State; Zip Code 948 Great Tree Lane San Antonio, TX 78258	<input type="checkbox"/> out-of-state PAC (ID#: Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation (Optional)		Employer (Optional)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

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SCHEDULE A1

The instruction guide explains how to complete this form.

Total pages Schedule A1:

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FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date

12/17/2003

Full name of contributor

David Dickson

☐ out-of-state PAC (ID# _____)

Contributor address; City; State; Zip Code

3003 Quentin Way San Antonio, TX 78230

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

10/1/2003

Full name of contributor

SABOR PAC

☐ out-of-state PAC (ID# _____)

Contributor address; City; State; Zip Code

9110 IH 10 West #100 San Antonio, TX 78230

Amount of
contribution (\$)

\$500.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

12/17/2003

Full name of contributor

Gary Joeris

☐ out-of-state PAC (ID# _____)

Contributor address; City; State; Zip Code

1390 E. Bitters Road San Antonio, TX 78216

Amount of
contribution (\$)

\$1,000.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

12/30/2003

Full name of contributor

Wade and Kim Shelton

☐ out-of-state PAC (ID# _____)

Contributor address; City; State; Zip Code

13319 Thornridge San Antonio, TX 78232

Amount of
contribution (\$)

\$1,000.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

12/15/2003

Full name of contributor

Bank One PAC

☒ out-of-state PAC (ID# C00128512)

Contributor address; City; State; Zip Code

1 Bank One Plaza Chicago, IL 60670

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A1**

2004 JAN 15 PM 3:36

The instruction guide explains how to complete this form.

Total pages Schedule A1:

Page 13 of 13

FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date

8/20/2003

Full name of contributor

James Allen

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

16227 Hidden View San Antonio, TX 78232

Amount of
contribution (\$)

\$479.79

In-kind contribution
description (if applicable)Food/Beverage for
Reception

Principal occupation (Optional)

Employer (Optional)

Date

12/17/2003

Full name of contributor

Greg & Christy Prescott

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

1942 Far Niente San Antonio, TX 78258

Amount of
contribution (\$)

\$505.15

In-kind contribution
description (if applicable)Food/Beverage for
Reception

Principal occupation (Optional)

Employer (Optional)

Date

12/17/2003

Full name of contributor

Laurie Zimmerman

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

1918 Cambria San Antonio, TX 78258

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

12/19/2003

Full name of contributor

Brenda Kelly

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

25003 Wingfoot San Antonio, TX 78258

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

Full name of contributor

☐ out-of-state PAC (ID#:

Contributor address; City; State; Zip Code

Amount of
contribution (\$)In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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POLITICAL EXPENDITURES**SCHEDULE F**

2004 JAN 15 PM 3:36

Total pages Schedule F:

Page 1 of 10

The instruction guide explains how to complete this form.

FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date

8/1/2003

Payee name

U.S. Postal Service

Amount

(\$)

\$68.00

Payee address; City; State; Zip Code

10250 John Saunders San Antonio, TX 78246

Purpose of payment (See instructions regarding type of information required.)

P.O. Box Renewal

****Complete if direct expenditure to benefit C/OH****
Candidate / Officeholder name Office sought Office held

Date

8/1/2003

Payee name

Election Support Services

Amount

(\$)

\$108.31

Payee address; City; State; Zip Code

5309 McCullough San Antonio, TX 78212

Purpose of payment (See instructions regarding type of information required.)

Lists

****Complete if direct expenditure to benefit C/OH****
Candidate / Officeholder name Office sought Office held

Date

8/1/2003

Payee name

Flower Boutique

Amount

(\$)

\$92.23

Payee address; City; State; Zip Code

13469 Blanco Road San Antonio, TX 78216

Purpose of payment (See instructions regarding type of information required.)

Floral Arrangement/Cruce

****Complete if direct expenditure to benefit C/OH****
Candidate / Officeholder name Office sought Office held

Date

8/5/2003

Payee name

Office Depot

Amount

(\$)

\$48.48

Payee address; City; State; Zip Code

13404 San Pedro San Antonio, TX 78216

Purpose of payment (See instructions regarding type of information required.)

Supplies

****Complete if direct expenditure to benefit C/OH****
Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES**SCHEDULE F**

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Total pages: Schedule F:

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FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date

8/5/2003

Payee name

Allison Greer

Amount

(\$)

\$167.69

Payee address; City; State; Zip Code

1723 Typhoon San Antonio, TX 78248

Purpose of payment (See instructions regarding type of information required.)

Reimburse/Phone

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name

Office sought

Office held

Date

8/5/2003

Payee name

Michael's

Amount

(\$)

\$208.11

Payee address; City; State; Zip Code

2375 N.W. Military San Antonio, TX 78213

Purpose of payment (See instructions regarding type of information required.)

Framing

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name

Office sought

Office held

Date

8/6/2003

Payee name

Office Max

Amount

(\$)

\$21.32

Payee address; City; State; Zip Code

9002 San Pedro San Antonio, TX 78216

Purpose of payment (See instructions regarding type of information required.)

Nametags

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name

Office sought

Office held

Date

8/11/2003

Payee name

Jason's Deli

Amount

(\$)

\$36.39

Payee address; City; State; Zip Code

55 N.E. Loop 410 San Antonio, TX 78216

Purpose of payment (See instructions regarding type of information required.)

Lunch Meeting

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name

Office sought

Office held

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POLITICAL EXPENDITURES**SCHEDULE F**

The instruction guide explains how to complete this form.

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FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date

8/13/2003

Payee name

U.S. Postal Service

Amount

(\$)

\$38.00

Payee address; City; State; Zip Code

10250 Juhn Saunders San Antonio, TX 78246

Purpose of payment (See instructions regarding type of information required.)

Postage

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

8/21/2003

Payee name

Baselice & Associates

Amount

(\$)

\$19,480.00

Payee address; City; State; Zip Code

Austin, TX 78746

Purpose of payment (See instructions regarding type of information required.)

Research

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

8/21/2003

Payee name

Cingular Wireless

Amount

(\$)

\$74.56

Payee address; City; State; Zip Code

P.O. Box 650574 Dallas, TX 75265

Purpose of payment (See instructions regarding type of information required.)

Monthly Service

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

8/27/2003

Payee name

Allison Greer

Amount

(\$)

\$1,071.12

Payee address; City; State; Zip Code

1723 Typhoon San Antonio, TX 78248

Purpose of payment (See instructions regarding type of information required.)

Contract Labor/Reimbursement

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURESRECEIVED
CITY OF SAN ANTONIO
CITY CLERK**SCHEDULE F**

The instruction guide explains how to complete this form.

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FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date

9/4/2003

Payee name

Flower Boutique

Amount
(\$)

\$62.03

Payee address; City; State; Zip Code

13469 Blanco Road San Antonio, TX 78216

Purpose of payment (See instructions regarding type of information required.)

Floral Arrangement/Steen, Sr.

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

9/4/2003

Payee name

Office Depot

Amount
(\$)

\$44.57

Payee address; City; State; Zip Code

13404 San Pedro San Antonio, TX 78216

Purpose of payment (See instructions regarding type of information required.)

Printer Cartridge

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

9/4/2003

Payee name

Republican Party of Bexar County

Amount
(\$)

\$100.00

Payee address; City; State; Zip Code

900 N.E. Loop 410 San Antonio, TX 78209

Purpose of payment (See instructions regarding type of information required.)

Tickets

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

9/15/2003

Payee name

Allison Greer

Amount
(\$)

\$1,234.61

Payee address; City; State; Zip Code

1723 Typhoon San Antonio, TX 78248

Purpose of payment (See instructions regarding type of information required.)

Contract Labor/Reimbursement

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES**SCHEDULE F**

The instruction guide explains how to complete this form.

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FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date

9/15/2003

Payee name

Money Mailer of S.A.

Amount
(\$)

\$125.26

Payee address; City; State; Zip Code

255 Claywell San Antonio, TX 78209

Purpose of payment (See instructions regarding type of information required.)

Printing

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

10/1/2003

Payee name

Cingular Wireless

Amount
(\$)

\$36.23

Payee address; City; State; Zip Code

P.O. Box 650574 Dallas, TX 75265

Purpose of payment (See instructions regarding type of information required.)

Monthly Service

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

10/7/2003

Payee name

Flower Boutique

Amount
(\$)

\$59.87

Payee address; City; State; Zip Code

13469 Blanco Rd. San Antonio, TX 78216

Purpose of payment (See instructions regarding type of information required.)

Floral Arrangement/Allen

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

9/30/2003

Payee name

Allison Greer

Amount
(\$)

\$2,260.00

Payee address; City; State; Zip Code

1723 Typhoon San Antonio, TX 78248

Purpose of payment (See instructions regarding type of information required.)

Contract Labor

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES**SCHEDULE F**

The instruction guide explains how to complete this form.

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FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date

10/24/2003

Payee name

AirCheck News Taping

Amount

(\$)

\$48.54

Payee address;

City;

State;

Zip Code

85 N.E. Loop 410 San Antonio, TX 78216

Purpose of payment (See instructions regarding type of information required.)

VHS Tapes

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name

Office sought

Office held

Date

10/24/2003

Payee name

Nicole Fowles

Amount

(\$)

\$45.30

Payee address;

City;

State;

Zip Code

San Antonio, TX 78248

Purpose of payment (See instructions regarding type of information required.)

Reimbursement for Flowers

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name

Office sought

Office held

Date

10/30/2003

Payee name

Allison Greer

Amount

(\$)

\$2,260.00

Payee address;

City;

State;

Zip Code

1723 Typhoon San Antonio, TX 78248

Purpose of payment (See instructions regarding type of information required.)

Contract Labor

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name

Office sought

Office held

Date

11/20/2003

Payee name

Cingular Wireless

Amount

(\$)

\$76.41

Payee address;

City;

State;

Zip Code

P.O. Box 650574 Dallas, TX 75265

Purpose of payment (See instructions regarding type of information required.)

Monthly Service

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name

Office sought

Office held

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CITY OF SAN ANTONIO
CITY CLERK**POLITICAL EXPENDITURES****SCHEDULE F**

The instruction guide explains how to complete this form.

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Total pages Schedule F: 36

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FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date

11/20/2003

Payee name

Carroll Schubert

Amount
(\$)

\$294.15

Payee address; City; State; Zip Code

P.O. Box 460455 San Antonio, TX 78246

Purpose of payment (See instructions regarding type of information required.)

Reimbursement

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

11/20/2003

Payee name

Public Strategies, Inc.

Amount
(\$)

\$6,000.00

Payee address; City; State; Zip Code

98 San Jacinto #900 Austin, TX 78701

Purpose of payment (See instructions regarding type of information required.)

Research

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

11/28/2003

Payee name

Flower Boutique

Amount
(\$)

\$65.26

Payee address; City; State; Zip Code

13469 Blanco Rd. San Antonio, TX 78216

Purpose of payment (See instructions regarding type of information required.)

Floral Arrangement/Reed

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

11/28/2003

Payee name

Allison Greer

Amount
(\$)

\$1,130.00

Payee address; City; State; Zip Code

1723 Typhoon San Antonio, TX 78248

Purpose of payment (See instructions regarding type of information required.)

Contract Labor

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES**SCHEDULE F**

The instruction guide explains how to complete this form.

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Total pages Schedule F:

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FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date

12/2/2003

Payee name

Office Depot

Amount
(\$)

\$24.09

Payee address; City; State; Zip Code

13404 San Pedro San Antonio, TX 78216

Purpose of payment (See instructions regarding type of information required.)

Supplies

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

12/2/2003

Payee name

Franklin's Printing

Amount
(\$)

\$504.65

Payee address; City; State; Zip Code

402 W. Rhapsody San Antonio, TX 78216

Purpose of payment (See instructions regarding type of information required.)

Printing

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

12/3/2003

Payee name

American Postal

Amount
(\$)

\$280.00

Payee address; City; State; Zip Code

Blanco Road San Antonio, TX 78216

Purpose of payment (See instructions regarding type of information required.)

Postage

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

12/3/2003

Payee name

Office Depot

Amount
(\$)

\$15.63

Payee address; City; State; Zip Code

13404 San Pedro San Antonio, TX 78216

Purpose of payment (See instructions regarding type of information required.)

Copies

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURESRECEIVED
CITY OF SAN ANTONIO
CITY CLERK**SCHEDULE F**

The instruction guide explains how to complete this form.

Total pages: 3
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FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date

12/15/2003

Payee name

Allison Greer

Amount

(\$)

\$1,130.00

Payee address; City; State; Zip Code

1723 Typhoon San Antonio, TX 78248

Purpose of payment (See instructions regarding type of information required.)

Contract Labor

**Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

12/16/2003

Payee name

Office Depot

Amount

(\$)

\$112.71

Payee address; City; State; Zip Code

13404 San Pedro San Antonio, TX 78216

Purpose of payment (See instructions regarding type of information required.)

File Boxes/Supplies

**Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

12/16/2003

Payee name

The Quarry Golf Club

Amount

(\$)

\$1,033.09

Payee address; City; State; Zip Code

444 E. Basse Road San Antonio, TX 78209

Purpose of payment (See instructions regarding type of information required.)

D-9 Holiday Party

**Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

12/19/2003

Payee name

Allison Greer

Amount

(\$)

\$84.39

Payee address; City; State; Zip Code

1723 Typhoon San Antonio, TX 78248

Purpose of payment (See instructions regarding type of information required.)

Reimbursement/Phone

**Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

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POLITICAL EXPENDITURES**SCHEDULE F**

The instruction guide explains how to complete this form.

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Total pages Schedule F:

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FILER NAME

Carroll W. Schubert

ACCOUNT # (Ethics commission filers)

Date

12/20/2003

Payee name

American Postal

Amount
(\$)

\$32.00

Payee address; City; State; Zip Code

Blanco Road San Antonio, TX 78216

Purpose of payment (See instructions regarding type of information required.)

Postage

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

12/28/2003

Payee name

Franklin's Printing

Amount
(\$)

\$305.07

Payee address; City; State; Zip Code

402 W. Rhapsody San Antonio, TX 78216

Purpose of payment (See instructions regarding type of information required.)

Printing

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

12/28/2003

Payee name

Allison Greer

Amount
(\$)

\$1,150.00

Payee address; City; State; Zip Code

1723 Typhoon San Antonio, TX 78248

Purpose of payment (See instructions regarding type of information required.)

Contract Labor/Reimbursement

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

Payee name

..

Amount
(\$)

Payee address; City; State; Zip Code

. . .

Purpose of payment (See instructions regarding type of information required.)

**Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

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**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**RECEIVED
CITY OF SAN ANTONIO
CITY CLERK**SCHEDULE G**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G:

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2 FILER NAME

Carroll W. Schubert

3 ACCOUNT # (Ethics Commission filers)

4 Date 10/12/2003	5 Payee name Avis, Rent A Car 6 Payee address; City; State; Zip Code Washington, DC 20201 7 Purpose of expenditure (See instructions regarding type of information required.) Rental Car	8 Amount (\$) \$75.25 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 10/12/2003	Payee name Hotel Washington Payee address; City; State; Zip Code 515 15th Street NW Washington, DC 20004 Purpose of expenditure (See instructions regarding type of information required.) Hotel	Amount (\$) \$197.75 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 11/20/2003	Payee name Four Season Hotel Payee address; City; State; Zip Code 98 San Jacinto Blvd. Austin, TX 78701 Purpose of expenditure (See instructions regarding type of information required.) Parking	Amount (\$) \$9.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 11/20/2003	Payee name Four Seasons Hotel Payee address; City; State; Zip Code 98 San Jacinto Blvd. Austin, TX 78701 Purpose of expenditure (See instructions regarding type of information required.) Meal	Amount (\$) \$12.15 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.)	Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended

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